

DMHMRSAS Human Rights Video Vignettes Guide Book

**Department of Mental Health, Mental Retardation and Substance Abuse Services
Office of Human Rights**

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DMHMRSAS
Human Rights Video Vignettes
Guide Book

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DMHMRSAS

Human Rights Video Vignettes

Guide Book

Introduction

This GuideBook is meant to be a resource for individuals conducting training sessions using the DMHMRSAS Human Rights Video Vignettes. Its primary purpose is to assist in the development of lesson plans and other training materials.

It is designed to provide suggestions for the trainer and to stimulate meaningful group discussions centered on the issues raised within each vignette.

It is designed to assist the trainer in the development of competency-based training sessions for new employees or in reviewing key concepts with experienced employees.

The GuideBook follows the videos, vignette by vignette, and is not meant to be a substitute for either the Video itself or the training outline and objectives of the trainer.

How to use the Guide Book

The left margin

The left margin is reserved for notes (or suggested instructions for the trainer-operator of the video). The margin notes involve the operation of the video. The notes will suggest pausing, starting, or re-playing the video at specific places to facilitate opportunities for open discussions.

The trainer must decide which methods and materials to use for their training sessions. The materials provided within this booklet are meant to be one of many resource materials that can be used to assist the trainer.

For example, during *a pause before the employee views the vignette*, the trainer may instruct the trainees to read certain parts of the Human Rights Regulations so that the employee will have a factual basis for the discussion that follows the viewing of the vignette.

During *a pause after the viewing of a vignette* the trainer may have the employees read certain parts of the Human Rights Regulations and then re-run the vignette for the second time so that the employee will have some insight about what he or she witnessed during the first showing.

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Trainer Notes

Specific suggestions will be found under each *Trainer Notes* heading. These suggestions may contain references to the Human Rights Regulations related to a specific issue arising from the interaction of the staff and resident in the vignette. The suggestions may be in the form of questions that the trainer might use to lead or invite discussion focused around human rights issues contained in the vignette. The suggestion might encourage the trainer to have the employees read specific parts of the Human Rights Regulations. The material under each *Trainer Notes* heading provides the trainer with options for lesson plan development. The trainer will decide which items to use.

The material found under the Trainer Notes can be used in current form, expanded, omitted, modified or used to create additional training materials based upon the training needs of the employees, the policy and procedures of the provider (e.g., “employees do not touch residents without the resident’s permission”) and the expertise and experience of the trainer.

The Trainer notes are designed to assist the trainer in developing his or her training material and training session. Trainers should not limit themselves to the suggestions contained in the Trainer notes. The Trainer notes do not identify all the potential issues occurring within the vignette or all of the applicable human rights citations which could address the issues raised by employees during a discussion about the vignette.

Vignette Script

The Script for each vignette is provided as a resource for the trainer. The script is not verbatim. It is provided to allow the trainer to develop training materials and develop lesson plans.

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Margin Notes
Start the Video Tape

Pause at beginning of the First Vignette's Title

Vignette Title: *Individuals' right to use the telephone*

Vignette Script

SETTING

An area that could be a ward with a pay phone. The patient is seen to be punching three numbers "Hello is this 911?"

I am at _____ hospital and they are keeping me here and I want to go home." The patient hangs up on his own.

After 30 seconds or so, the patient approaches the phone again and begins to dial.

A staff member approaches the patient and says, "Please hang up, we have to dial your phone numbers for you because you have called 911 more than a dozen times."

The patient says, "that's not fair, I can dial who I want to and I can use the phone on my own, it is a public phone."

The staff member says, "your treatment plan says that we dial your numbers for you, for 3 months".

The patient says "I'm calling the advocate, it is my right to make phone calls."

Trainer Notes:

Focus Points:

Discuss: *Assurance of Rights* See 12 VAC 35-115-40

- Individuals are entitled to know what their rights are under the Human Rights Regulations. See 12 VAC 35-115-40 B.
- Every individual receiving services has a right to seek informal resolutions to complaints, and to file a human rights complaint. See 12 VAC 35-115-40 C.

Focus Points:

Question: Is there a *right* to use the telephone?

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First Vignette-- *Individuals' right to use the telephone*

Trainer Notes Continued

Focus Points:

Exercise:

- Have trainees (i.e., employees) read the Human Rights Regulation on *Dignity*, parts A, B, and C. [See 12 VAC 35-115-50; especially, E. 6.]
- Have trainees (i.e., employees) read the Human Rights Regulations on *Restrictions on Freedoms of Everyday Life* Part A. [See 12 VAC 35-115-100]

Focus Points:

Discussion: Is there a *right* to use the telephone?

Margin Notes

Start the Video to Play the Vignette.

Pause at end of the Vignette

Trainer Notes:

Focus Points:

- Question: What happened in this vignette? (Lead open discussion. Encourage the trainees to describe and characterize what they witnessed occurring in the vignette.).
- A Resident has all the freedoms of everyday life that are consistent with his need for services, his protection, and the protection of others, and that do not interfere with his services or the services of others. [See 12 VAC 35-115-100 A. 1 a through g].
- A Resident has the freedom to communicate, associate, and meet privately with anyone the resident chooses. [See 12 VAC 35-115-100 A. 1. b.]
- Providers may limit the use of a telephone in certain ways. Have trainees read [*Dignity* See 12 VAC 35-115-50 E. 4.]. Have trainees read [*Dignity* See 12 VAC 35-115-50 E. 6.].

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First Vignette-- *Individuals' right to use the telephone*

Focus Points: Continued

- Except as provided under the Dignity Exceptions 12 VAC 35-115-50 E., providers may impose a restriction if a qualified professional involved in providing services to the individual has in advance determined that the restriction is necessary for effective treatment of the individual or to protect him or others from personal harm, injury or death [See 12 VAC 35-115-100 C. 1. b.].
- The reason for the restriction must be documented in the individual's service record [See 12 VAC 35-115-100 C. 1. c.].
- Question: What is the authority of Treatment Teams? Does the Treatment Team have authority to impose this restriction? [See 12 VAC 35-115-100 C. 1. a through d.]. Does the resident have the right to participate in this type decision? [See 12 VAC 35-115-70 A.
- Did the treatment team provide criteria for removing the restriction?
- Can the provider intervene to prevent illegal acts by residents? Where is this issue addressed in the regulations?

Replay the Vignette.

Pause at the End of the Vignette

Trainer Notes:

Focus Points:

- Discussion:
Encourage the trainees (i.e., employees) to discuss the vignette in terms of the Human Rights Regulations and what they would do differently (if anything).
- Role-Play:
Let several trainees play out this scenario and allow others to discuss what they witnessed.

This ends the first vignette discussion session

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Margin Notes
Start the Video Tape
(Second Vignette)

Pause at the beginning of the Vignette's Title

Vignette Title: *Individuals' right to refuse medication*

Vignette Script

SETTING

Any hospital like setting.

A staff member who looks like a nurse walks up to the patient with a medicine cup and a glass of water and says, "here are your pills".

The patient says "I don't want them and I won't take them".

The staff member says "You have schizophrenia and these will help you."

The patient says, "Maybe I do, but I don't like the side effects."

The staff says, "You will adjust to the side effects. We are trying to make you better and you are committed to the hospital because you have schizophrenia. If you don't take your medicine, we will have to give you a shot, it is your choice."

Trainer Notes:

Focus Points:

Discussion:

- Question: Is there a *right* to refuse medication?
- Question: What happened in this vignette? (Lead open discussion. Encourage the trainees to describe and characterize what they witnessed occurring in the vignette.).
- Patients have the right to refuse treatment, even if they are committed to the hospital. [See *Consent* 12 VAC 35-115-30].

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Second Vignette-- *Individuals' Right to refuse medication*

Trainer Notes:

Focus Points:

Discussion: Continued

- An exception to that is when the patient has a court order for specific treatment, or has an Authorized Representative who makes treatment decisions for him or her. See *Restrictions on Freedoms of Everyday Life* 12 VAC 35-115-100 C. 2; and, Special procedures for LHRC Review involving consent 12 VAC 35-115-200; also see, *Participation in Decision Making* 12 VAC 35-115-70 A., A8, A9, B7, B8a-c, and B9a-c.].
- The patient can appeal to the LHRC if the Legally Authorized Representative makes a decision that the patient does not agree with. [See Special procedures for LHRC Review involving consent 12 VAC 35-115-200]. Also see *Participation in Decision Making* 12 VAC 35-115-70 B., B5, B6, B7, B8, and B9.
- Even though it might appear that it is in the patient's best interest to take the medications, patients have the right to make their own choices. Sometimes these choices are not the choices that staff would have made. [See *Consent* 12 VAC 35-115-30; and, *Participation in decision making* 12 VAC 35-115-70 A.1.].

Question:

Is giving the patient the choice between taking medicine by mouth or by an injection an actual choice about whether or not to take the medication?

Trainer Notes

Focus Points:

Exercise:

- Have trainees (i.e., employees) read the Human Rights Regulation on *Consent* 12 VAC 35-115-30.
- Have trainees (i.e., employees) read the Human Rights Regulations on *Participation in decision making* 12 VAC 35-115-70 A and B; especially, 70A, A4, A8, A9, 70B, B7, B8 a-c and B9 a-c.

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Second Vignette-- *Individuals' right to refuse medication*

Trainer Notes

Focus Points: Continued

Exercise:

- Have trainees (i.e., employees) read the Human Rights Regulation on Freedoms of everyday life 12 VAC 35-115-100 C. 2; and, *Participation in decision making* 12 VAC 35-115-70 C. 2.
- Have trainees (i.e., employees) read the Human Rights Regulation on Special procedures for LHRC Review involving consent 12 VAC 35-115-200.

Discussion: Is there a *right* to refuse medication?

Margin Notes

Start the Video to Play the Vignette .

Pause at end of Vignette

Second Vignette-- *Individuals' right to refuse medication*

Trainer Notes:

Focus Points:

Question: What happened in this vignette? (Lead open discussion. Encourage the trainees to describe and characterize what they witnessed occurring in the vignette.).

- A Resident has all the freedoms of everyday life that are consistent with his need for services, his protection, and the protection of others, and that do not interfere with his services or the services of others. [See 12 VAC 35-115-100 A. 1.].
- Providers may limit the everyday freedoms in certain ways. Have trainees read *Freedoms of Everyday Life* 12 VAC 35-115-100 C. 2.

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Second Vignette-- *Individuals' right to refuse medication*

Replay this Vignette.

Pause at the End of the Vignette

Trainer Notes

Focus Points:

Discussion: Is there a *right* to refuse medication?

Discussion: Encourage the trainees (i.e., employees) to discuss the vignette in terms of the Human Rights Regulations and what they would do differently (if anything).

Role-Play: Let several trainees play out this scenario and allow others to discuss what they witnessed.

This ends the vignette and discussion session

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Margin Notes
Start the Video Tape
(Third Vignette)

Pause at the beginning of the Vignette's Title

Vignette Title: *Freedoms of Everyday Life—Vending Machine*

Vignette Script

SETTING

The Setting is in front of a row of vending machines in what looks like a hospital or institution.

Patient on diabetic diet buying candy bars.

The patient is finding his/her money and begins to put the money in the slot of the candy machine.

He/She is already holding a soda (or item) she has already bought.

A person looking like a staff member comes up to her and says,
“you should not have bought those sweets. You need to give them to me and eat the diabetic diet we give you. The Doctor ordered it. You have to choose the diabetic snacks or use your money to buy non-food items. We will refund the money you spent.”

The patient says, “I can eat what I bought and I am not giving them back.”

Trainer Notes

Focus Points:

Discussion: Is there a *right* to choose?
Is there a *right* to use the vending machine?
What are “Freedoms of Everyday Life”?

Exercise:

- Have trainees (i.e., employees) read the Human Rights Regulation on *Dignity*, parts A, and C. 2. [See 12 VAC 35-115-50]
- Have trainees (i.e., employees) read the Human Rights Regulations on *Restrictions on Freedoms of Everyday Life* Part A. [See 12 VAC 35-115-100; especially, A 1 a-g and 2; and, C. 1. a-d].

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Third Vignette—*Freedoms of Everyday Life—Vending Machine*

Trainer Notes

Focus Points: Continued

Exercise:

- Have trainees (i.e., employees) read the Human Rights Regulation on *Freedoms of Everyday Life* 12 VAC 35-115-100 C. 2.
- Have trainees (i.e., employees) read the Human Rights Regulation on *Participation in Decision Making* 12 VAC 35-115-70. A. 1-4; and 70 B. 1-3.

Discussion: Is there a *right* to use vending machines?

Play this Vignette.

Pause at the End of the Vignette

Trainer Notes:

Focus Points:

Question: What happened in this vignette? (Lead open discussion. Encourage the trainees to describe and characterize what they witnessed occurring in the vignette.).

- A Resident has all the freedoms of everyday life that are consistent with his need for services, his protection, and the protection of others, and that do not interfere with his services or the services of others. [See 12 VAC 35-115-100 A. 1.].
- Providers may limit the everyday freedoms in certain ways. Have trainees read *Freedoms of Everyday Life* 12 VAC 35-115-100 C. 2.

Focus Points:

Is it a patient right to spend their own personal funds as they wish?

Can a patient use the vending machines and/or purchase items in a canteen?

Can the patient refuse treatment, including whether or not to follow a diabetic diet?

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Third Vignette—*Freedoms of Everyday Life—Vending Machine*

Trainer Notes: Continued

Focus Points:

Even if the staff offers to refund the money, the patient does not have to follow their advice.

Staff can give counseling and education about diabetes, but cannot impose a diet on a patient unless restriction requirements have been met.

Neither can the staff put the vending machines in a locked room to prevent patient access.

Trainer Notes

Focus Points:

Discussion: Is there a *right* to choose?
 Is there a right to use vending machines?

Discussion: Encourage the trainees (i.e., employees) to discuss the vignette in terms of the Human Rights Regulations and what they would do differently (if anything).

Role-Play: Let several trainees play out this scenario and allow others to discuss what they witnessed.

This ends the vignette and discussion session

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Margin Notes
Start the Video Tape
(Fourth Vignette)

Pause at the beginning of the Vignette's Title

Vignette Title: *Freedoms of Everyday Life—Smoking*

Vignette Script

SETTING

Open area inside building.

The client smokes cigarettes.

Client says, "Why can't I have cigarettes?"

Staff says, "This is not the smoking area. It is not smoking time yet."

ANOTHER POSSIBLE SCENARIO (Not shown in the Video presentation—trainer can use for role-play)

The client smokes cigarettes.

The staff uses his cigarettes as a form of token reward system whereas he is given a cigarette based on a schedule proving his behavior is good enough to "earn" a smoke.

The resident wants to carry his own cigarettes so that he can smoke when he chooses.

Trainer Notes

Focus Points:

- While it is within the right of the facility to restrict smoking to designated areas, it is the client's right to accept the health risks associated with smoking.
- Staff can offer counseling and education about the dangers of smoking, but the choice of whether or not to smoke remains with the client.
- Restrictions must meet the requirements established in 12 VAC 35-115-100.

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Fourth Vignette—*Freedoms of Everyday Life—Smoking*

Trainer Notes

Focus Points:

Discussion: Is there a *right* to choose?
Is there a *right* to smoke?

Exercise:

- Have trainees (i.e., employees) read the Human Rights Regulation on *Dignity*, parts A, and C. 2. and, C. 3. a-e. [See 12 VAC 35-115-50].
- Have trainees (i.e., employees) read the Human Rights Regulations on *Restrictions on Freedoms of Everyday Life* Part A. [See 12 VAC 35-115-100; especially, A 1 a-g and 2; and, C. 1. a-d].

Trainer Notes

Focus Points:

Exercise:

- Have trainees (i.e., employees) read the Human Rights Regulation on *Restrictions on Freedoms of Everyday Life* 12 VAC 35-115-100 C. 2.
- Have trainees (i.e., employees) read the Human Rights Regulation on *Participation in Decision Making* 12 VAC 35-115-70. A. 1-4; and 70 B. 1-3.

Discussion: Is there a *right* to use cigarettes?

Play this Vignette.

Pause at the End of the Vignette

Trainer Notes:

Focus Points:

- Question: What happened in this vignette? (Lead open discussion. Encourage the trainees to describe and characterize what they witnessed occurring in the vignette.).
- A Resident has all the freedoms of everyday life that are consistent with his need for services, his protection, and the

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protection of others, and that do not interfere with his services
or the services of others. [See 12 VAC 35-115-100 A. 1.].

Fourth Vignette—*Freedoms of Everyday Life—Smoking*

Trainer Notes:

Focus Points: Continued.

- Providers may limit the everyday freedoms in certain ways.
Have trainees read *Freedoms of Everyday Life* 12 VAC 35-115-100 C. 2.

Focus Points:

- It is a patient right to spend their own personal funds as they wish.
- Staff can give counseling and education about tobacco or cigarettes, but cannot impose a decision on a resident unless it meets the requirements in 12 VAC 35-115-100 C, 2.

- Question:

Can a treatment plan make a difference? What's involved in the development of such a plan?

Question:

Can a behavioral plan make a difference? What's involved in the development of such a plan?

Trainer Notes

Focus Points:

Discussion: Is there a *right* to choose?
Is there a right to use cigarettes?

Discussion: Encourage the trainees (i.e., employees) to discuss the vignette in terms of the Human Rights Regulations and what they would do differently (if anything).

Role-Play: Let several trainees play out this scenario and allow others to discuss what they witnessed.

The ends the vignette and discussion session

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Margin Notes
Start the Video Tape
(Fifth Vignette)

Pause at the beginning of the Vignette's Title

Vignette Title: *Individuals' right to watch TV*

Vignette Script

SETTING

It is 9:00 PM, which is usually considered by the living area staff to be bedtime for the clients.

One client does not want to go to bed because his favorite TV program is about to come on and he wants to stay up to watch it. A staff member turns the TV off and tells the client that it is 9:00 and he has to go to bed whether he is ready or not.

Trainer Notes

Focus Points:

- It is the client's right to refuse to go to bed and to watch the TV program of his choice.
- It is normal for us to stay up as late as we want to watch TV or engage in most any other activity of choice so long as the activity is socially appropriate and does not infringe on the rights of others. Clients have the same right.

Trainer Notes

Focus Points:

- The client has the right to watch TV if he chooses to do so. [See *Restrictions on Freedom on Everyday Life* 12 VAC 35-115-100 A. 1. d. also B. 1-5; and, C 1. b through d; and, C. 3 and 4.].
- While it is within the right of the facility to restrict certain activities to designated areas, it is the client's right to choose. [See *Restrictions on Freedom on Everyday Life* 12 VAC 35-115-100 B. 1-5; and, C 1. b through d; and, C. 3 and 4.].
- Staff can offer counseling and education about the choice being made, but the choice of whether or not to participate remains with the client.

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Fifth Vignette-- *Individuals' right to watch TV*

Trainer Notes

Focus Points:

Discussion: Is there a *right* to choose?
Is there a *right* to watch TV?

Exercise:

- Have trainees (i.e., employees) read the Human Rights Regulation on *Dignity*, parts A, and C. 2. and, C. 3. a-f. [See 12 VAC 35-115-50]
- Have trainees (i.e., employees) read the Human Rights Regulations on *Restrictions on Freedoms of Everyday Life* Part A. [See 12 VAC 35-115-100; especially, A 1 a-g and 2; and, C. 1. a-d; and, C3 and C4.].

Trainer Notes

Focus Points:

Exercise:

- Have trainees (i.e., employees) read the Human Rights Regulation on *Restrictions on Freedoms of Everyday Life* 12 VAC 35-115-100 C. 2.
- Have trainees (i.e., employees) read the Human Rights Regulation on *Participation in Decision Making* 12 VAC 35-115-70. A. 1-4; and 70 B. 1-3.

Discussion: Is there a *right* to watch TV?

Play this Vignette.

Pause at the End of the Fifth Vignette

Trainer Notes:

Focus Points:

- Question: What happened in this vignette? (Lead open discussion. Encourage the trainees to describe and characterize what they witnessed occurring in the vignette.).
- A Resident has all the freedoms of everyday life that are consistent with his need for services, his protection, and the protection of others, and that do not interfere with his services or the services of others. [See 12 VAC 35-115-100 A. 1.].

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Fifth Vignette-- *Individuals' right to watch TV.*

Trainer Notes:

Focus Points: Continued.

- Providers may limit the everyday freedoms in certain ways.
Have trainees read *Freedoms of Everyday Life* 12 VAC 35-115-100 C. 2.

Focus Points:

- Staff can give counseling and education about getting enough sleep but cannot impose a decision on a resident, as long as the resident is competent to make her own decisions.

Question:

Can a treatment plan make a difference? What's involved in the development of such a plan?

Question:

Can a behavioral plan make a difference? What's involved in the development of such a plan?

Trainer Notes

Focus Points:

Discussion: Is there a *right* to choose?
Is there a right to watch TV?

Discussion: Encourage the trainees (i.e., employees) to discuss the vignette in terms of the Human Rights Regulations and what they would do differently (if anything).

Role-Play: Let several trainees play out this scenario and allow others to discuss what they witnessed.

This ends the vignette and discussion session

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Margin Notes
Start the Video Tape
(Sixth Vignette)

Pause at the beginning of the Vignette's Title

Vignette Title: *Individuals' Right to have Visitors.*

Vignette Script

SETTING

The resident is in the staff office talking with staff.
The resident says, "Why can't my girlfriend visit? My LAR and I agree she can visit. She is on the approved visitation list. My counselor continues to not let her come and visit."

Trainer Notes

Focus Points:

- In services provided in residential setting, each individual has the right to have or refuse visitors. [See *Dignity* 12 VAC 35-115-50 and E. 5.].

Trainer Notes

Focus Points:

- The client has the right to visitations if he chooses to have visitors. [See *Restrictions on Freedom on Everyday Life* 12 VAC 35-115-100 A. 2.; and, B.1 through B5].
- While it is within the right of the facility to restrict certain activities to designated areas, it is the clients right choose. [See *Restrictions on Freedom on Everyday Life* 12 VAC 35-115-100 C.1 through 4.].
- Staff can offer counseling and education about the choice being made, but the choice of whether or not to participate remains with the client. [*Participation in Decision Making* 12 VAC 35-15-70 A. 1 through 3; and B. 1 through 4.].

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Sixth Vignette-- *Individuals' Right to have Visitors*

Trainer Notes

Focus Points:

Discussion: Is there a *right* to choose?
 Is there a *right* to have visitation?

Exercise:

- Have trainees (i.e., employees) read the Human Rights Regulation on *Individuals' Right to have Visitors.*, parts A and C. 8; and E. 5. [See 12 VAC 35-115-50].
- Have trainees (i.e., employees) read the Human Rights Regulations on *Restrictions on Freedoms of Everyday Life* Part A. [See 12 VAC 35-115-100; especially, A 1 a-g and 2; and, C. 1. a-d; and, C3 and C4.].
- Have trainees (i.e., employees) read the Human Rights Regulation on *Participation in Decision Making* 12 VAC 35-115-70. A. 1-4; and 70 B. 1-4.

Discussion: Is there a *right* to have visitation?

Play this Vignette.

Pause at the End of the Sixth Vignette

Trainer Notes:

Focus Points:

Question:

What happened in this vignette? (Lead open discussion. Encourage the trainees to describe and characterize what they witnessed occurring in the vignette.).

- A Resident has all the freedoms of everyday life that are consistent with his need for services, his protection, and the protection of others, and that do not interfere with his services or the services of others. [See 12 VAC 35-115-100 A. 1.].

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Sixth Vignette-- *Individuals' Right to have Visitors.*

Trainer Notes:

Focus Points: Continued.

- Providers may limit the everyday freedoms in certain ways.
Have trainees read *Freedoms of Everyday Life* 12 VAC 35-115-100 C. 2.

Focus Points:

- Staff can give counseling and education about issues surrounding certain visits but cannot impose a decision on a resident, as long as the resident is competent to make her own decisions.

Question:

Can a treatment plan make a difference? What's involved in the development of such a plan?

Question:

Can a behavioral plan make a difference? What's involved in the development of such a plan?

Trainer Notes

Focus Points:

Discussion: Is there a *right* to choose?
 Is there a right to have visitation?

Discussion: Encourage the trainees (i.e., employees) to discuss the vignette in terms of the Human Rights Regulations and what they would do differently (if anything).

Role-Play: Let several trainees play out this scenario and allow others to discuss what they witnessed.

This ends the vignette and discussion session

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Margin Notes

Start the Video Tape

(Seventh and Eighth Vignettes)

Pause at the beginning of the Vignette's Title

Vignette Titles: *Individuals' Right to be Free From Abuse.*
Individuals' Right to be Free from Exploitation

Vignette Script

SETTING--Abuse

The resident is in the staff office talking with staff.

Staff says, "I understand you want to talk with me about T being restrained last night."

The resident says, "I saw Mr. ____ take T and (moves his hands and puts them around his neck and makes motions like someone being choked)."

Staff says, "choking him?"

Resident says, "yes."

Staff immediately picks up phone to call the Director's Office.

SETTING--Exploitation

The resident is in the staff office talking with staff.

Staff says, "What can I do for you today?"

The resident says, "Mr. _____ must think I can't count or something. He purchased a pair of shoes for me. They were nice shoes too. I gave him \$80.00 and the box said the shoes cost \$59.00. 59 from 80 I should have gotten change back and I didn't get any change back. Mr. _____ must think I can't count. I want my change."

The staff asked, "When did this happen?"

Resident says, "A few days ago."

Staff says, "You know you have been on really heavy meds for your medical condition, and I think you miscounted your change.

We really know Mr. _____ very well and he is a conscientious employee. We don't think he would have taken your money."

The resident says, "We'll see!"

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Seventh and Eighth Vignette-- *Individuals' Right to be Free from Abuse.*
Individuals' Right to be Free from Exploitation

Trainer Notes

Focus Points:

- Every individual receiving services has a right to seek informal resolution and to file a human rights complaint. Any individual receiving services or anyone acting on his behalf may file a complaint and get help in filing the complaint. *Assurance of Rights* 12 VAC 35-115-40 part C. [See 12 VAC 35-115-150 *General provisions* of the Compliant Resolution Process].

Trainer Notes

Focus Points:

- The client has the right to be free from abuse/exploitation. See *Definitions*, 12 VAC 35-115-30, *Abuse* and *Exploitation*.
- Also see *Dignity* 12 VAC 35-115-50 Parts A and B. 2, B5: and, C. 1.; especially, D. 3 a through h.

Trainer Notes

Focus Points:

Discussion: Is there a *right* to be free from abuse?
Is there a *right* to be free from exploitation?

Exercise:

- Have trainees (i.e., employees) read the Human Rights Regulation on *Dignity*, Parts A and B. 2, B5: and, C. 1.; especially, D. 3 a through h.
- Have trainees (i.e., employees) read the Human Rights Regulations on *Complaint and Fair Hearing*. [See 12 VAC 35-115-140 Parts A and B.].

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Seventh and Eighth Vignette-- *Individuals' Right to be Free From Abuse.*
Individuals' Right to be Free from Exploitation

Trainer Notes

Focus Points:

Exercise: Continued.

- Have trainees (i.e., employees) read the Human Rights Regulation on *Informal Complaint* Process 12 VAC 35-115-160. Parts A. through G.
- Have trainees (i.e., employees) read the Human Rights Regulation on *Local Human Rights Committee Hearing and Review Procedures* 12 VAC 35-115-180. Part A.
- Have trainees (i.e., employees) read the Human Rights Regulation on *Special procedures for emergency hearing by the LHRC* 12 VAC 35-115-190. Part A. through E.

Discussion: Is there a *right* to be free from abuse?
 Is there a *right* to be free from exploitation?

Play this Vignette.

Pause at the End of the Vignette

Trainer Notes:

Focus Points:

- Question: What happened in this vignette? (Lead open discussion. Encourage the trainees to describe and characterize what they witnessed occurring in the vignette.).
- A Resident has all the freedoms of everyday life that are consistent with his need for services, his protection, and the protection of others, and that do not interfere with his services or the services of others. [See 12 VAC 35-115-100 A. 1.].

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Seventh and Eighth Vignette-- *Individuals' Right to be Free From Abuse.*
Individuals' Right to be Free from Exploitation

Trainer Notes:

Focus Points: Continued.

- Providers may limit the everyday freedoms in certain ways.
Have trainees read Freedoms of everyday life 12 VAC 35-115-100 C. 2.

Focus Points:

Question: Did the staff person violate the human rights of any individual when discussing the choking situation?

Question: Did the staff person violate the human rights of any individual when discussing the exploitation situation?

Question: Were the statements of the resident in the exploitation situation a complaint?

Trainer Notes

Focus Points:

Discussion: Is there a *right* to be free from abuse?
Is there a *right* to have a complaint investigated?

Discussion: Encourage the trainees (i.e., employees) to discuss the vignette in terms of the Human Rights Regulations and what they would do differently (if anything).

Role-Play: Let several trainees play out this scenario and allow others to discuss what they witnessed.

This ends the vignette and discussion session

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Margin Notes
Start the Video Tape
(Ninth Vignette)

Pause at the beginning of the Ninth Vignette's Title

Vignette Title: *Individuals' Right to Participate in Decision-Making*

Vignette Script

SETTING

It is 6:00 AM on the weekend, which is usually considered by staff (on every day of the week) to be wake up time for clients.

One client refuses to get out of bed.

The staff member pulls the covers off the client and demands that she get up and get dressed for the day so that she will be up and dressed when the oncoming shift arrives.

Trainer Notes:

Focus Points:

- It is the client's right to stay in bed if she chooses to do so.
- This is especially appropriate, being that it is the weekend and the schedule does not require the client to be at her day program.
- The client should be allowed to stay in bed and her daily routine/activity schedule is adjusted to accommodate additional activities.

Question: Is there a *right* to participate in decision making?

Question: What happened in this vignette? (Lead open discussion. Encourage the trainees to describe and characterize what they witnessed occurring in the vignette.).

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Ninth Vignette-- *Individuals' Right to Participate in Decision Making*

Trainer Notes:

Focus Points: Continued

Exercise:

- Have trainees read *Participation in Decision Making* 12 VAC 35-115-70 Part A. 1 through 3. Note: Every individual has a right to participate meaningfully in decisions regarding all aspects of services.
- Have trainees read *Participation in Decision Making* 12 VAC 35-115-70 Part B. 2, and B. 1 through 3.
- Have trainees read *Services* 12 VAC 35-115-60 Part A and B 2, 5, 6,7, and 8.

Discussion: Is there a *right* to participate in decision making?

Margin Notes

Start the Video to Play the Vignette .

Pause at end of Vignette

Ninth Vignette-- *Individuals' Right to Participate in Decision Making*

Trainer Notes:

Focus Points:

Question: What happened in this vignette? (Lead open discussion. Encourage the trainees to describe and characterize what they witnessed occurring in the vignette.).

- A Resident has all the freedoms of everyday life that are consistent with his need for services, his protection, and the protection of others, and that do not interfere with his services or the services of others. [See 12 VAC 35-115-100 A. 1.].
- Providers may limit the everyday freedoms in certain ways. Have trainees read *Restrictions on Freedoms of Everyday life* 12 VAC 35-115-100 C. 2.

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Ninth Vignette-- *Individuals' Right to Participate in Decision Making*

Replay this Vignette.

Pause at the End of the Vignette

Trainer Notes

Focus points:

Discussion: Is there a *right* to participate in decision making?

Discussion: Encourage the trainees (i.e., employees) to discuss the vignette in terms of the Human Rights Regulations and what they would do differently (if anything).

Role-Play: Let several trainees play out this scenario and allow others to discuss what they witnessed.

This ends the vignette and discussion session

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Appendix A

MR Discussion Scenarios

1. The client smokes cigarettes. The staff uses his cigarettes as a form of token reward system whereas he is given a cigarette based on a schedule proving his behavior is good enough to “earn” a smoke. He wants to carry his own cigarettes so that he can smoke when he chooses.
2. The client has over-heard staff talking about an R-rated movie they saw over the weekend and the client states that she would also like to see the movie. Even though the client is 53 years old, she is told that she cannot see that movie because it contains adult language, graphic, violence and partial nudity.
3. Two clients who share the same room are constantly arguing and sometimes fighting over one thing or another. Both of them have expressed terms that they do not like one another and would prefer a different roommate. They are told by staff that bed space is limited and that this is the only room available for them so they will just have to get along.
4. It is 9:00 PM, which is usually considered by the living area staff to be bedtime for the clients. One client does not want to go to bed because his favorite TV program is about to come on and he wants to stay up to watch it. A staff member turns the TV off and tells the client that it is 9:00 and he has to go to bed whether he is ready or not.
5. It is 6:00 AM on the weekend, which is usually considered by staff (on every day of the week) to be wake up time for clients. One client refuses to get out of bed. The staff member pulls the covers off the client and demands that she get up and get dressed for the day so that she will be up and dressed when the oncoming shift arrives.
.
6. Staff are preparing assessment reports for a client’s annual ID Team meeting. While interviewing the client to determine his goals and preferences the client states that he has a girl friend in another unit and that he would like to have some time to visit with her. He is told by staff that because of his “condition” he cannot have a girlfriend and that even if he could, there was not enough staff coverage to escort him over to the other unit to visit his friend.
7. A mother of an individual at a mental retardation facility complained that her child is being neglected because no one supervises him brushing his teeth; his fingernails/toenails are not clipped, he has athletes feet; and his hair is not being cut properly. " Should this be reported as an abuse allegation?

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8. An individual reported that he was sitting in a day room while a staff member was sweeping the floor. The staff member came very close to him, lean on the broom, and grabbed the broom handle tightly. Then the staff member told the individual it was time to go to bed. The individual stated that he felt threatened by this member of the staff." Should this be reported as an abuse allegation?

9. An individual was told "if you do not pick up that can, (the individual had thrown a soda can on the floor), you will not be allowed to go outside with the rest of the clients. Should this incident be reported as an abuse allegation?

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Appendix B

MH Discussion Scenarios

1. Summer - It is 93 degrees on the Ward thermometer and there are fans in operation. The patients say, "it is so hot in here". The staff reply "we called for the repairman". The patients say, "you told us that 10 days ago". The staff says "we are doing the best we can, the building is old. We are just as hot as you are."
2. The patient has called 911 from the ward phone 8 times in the last week. When 911 answers, he tells them he wants to leave the hospital. In the patient's care plan it says that all calls are to be dialed by the staff for this patient. The patient says, "I'm calling the advocate, I have the right to make private personal phone calls."
3. The ward has a token or level system where points are earned for privileges. The staff has written in the treatment plan that if 20 points are not earned by 6PM, the patient cannot call his sister in the evening.
4. The patient is refusing his medicine and says "I don't want it and I won't take it." The patient is committed to the hospital for schizophrenia. The patient does not have an Authorized Representative. The staff says, "If you don't take your medicine, we will have to give you a shot, take your choice. We are trying to make you better so you can leave the hospital."
5. The patient is a diabetic and the Doctor has written the order for a Diabetic Diet on her chart. The patient uses her own money and buys candy bars and ice cream from the canteen. The staff tells her that she has an order for a diabetic diet and must make selections from the low sugar items, or purchase nonfood items.
6. A staff member takes a patient into a clothing room that has shelves of "State" clothing. She asks the patient to make a selection of 3 outfits. She tells the patient that when the items are laundered, they will be placed back in the clothing room and the patient can make a selection from the clean clothing.

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Appendix C

SUBSTANCE ABUSE DISCUSSION SCENARIOS

1. A client in a SA residential reported to her counselor that another staff person had offered to pay her for letting the staff person use her child as a dependent when the staff filed her tax return. The client reported that the staff person gave her \$200 dollars in anticipation of claiming her daughter as a dependent. The client said that latter she felt the staff person took advantage of her because she felt she should have gotten more money than &200 dollars.

2. A staff member of a SA residential program reported several serious program and human violations to the Regional Advocate. The allegations were subsequently investigated by the Regional Advocate and the Office of Licensing and the program was cited for the violations and was required to submit to the Department, a Plan of Correction. The staff member reports that she has been ostracized by program staff and that she has been the victim of staff retaliation since she reported the violations to the Office of Human Rights.

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